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## BIB DATA SHEET

CONFIRMATION NO. 5033

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/653,879	09/02/2003 RULE	600	4123	891,144-001	
<b>APPLICANTS</b> Timothy B. Petrick, Brooklyn Park, MN; Steven N. Willard, Brooklyn Center, MN; Peter T. Keith, St. Paul, MN; Dennis W. Wahr, Minnetonka, MI;					
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 01/07/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /VICTORIA P CAMPBELL/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWINGS</b> 11	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 8
<b>ADDRESS</b> O'Melveny & Myers LLP IP&T Calendar Department LA-1118 400 South Hope Street Los Angeles, CA 90071-2899 UNITED STATES					
<b>TITLE</b> Devices and methods for crossing a chronic total occlusion					
<b>FILING FEE RECEIVED</b> 935	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		